

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new non-provisional applications under 37 CFR 1.53(b))

Attorney Docket No.	HSJ9-2003-0048US1	(0105-0030)
First Inventor or Application Identifier:	Hsiao	
Title:	Magnetic Head Having A Write Coil Structure With A Reduced Electrical Resistance For Reducing Thermal Protrusion	
Express Mail Label No.:	ER 259338301 US	
Application Elements <small>(See MPEP chapter 600 concerning utility patent application contents)</small>		ADDRESS TO: MAIL STOP PATENT APPLICATION Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small>	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Specification [Total Pages 30] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> • Descriptive title of the Invention • Cross References to Related Applications • Statement Regarding Fed sponsored R&D • Background of the Invention • Brief Summary of the Invention • Brief Description of the Drawings (<i>if filed</i>) • Detailed Description • Claim(s) • Abstract of the Disclosure 	7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement Verifying identity 	
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total sheets 7]	ACCOMPANYING APPLICATION PARTS	
4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <small>[Note Box 5 below]</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 	8. <input checked="" type="checkbox"/> Assignment 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(when there is an assignee)</small>	
	10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (Form 1449) <input type="checkbox"/> Citations	
	12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (CPEP 503) <small>(Should be specifically itemized)</small>	
	14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement Status is still proper and desired	
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
	16. <input checked="" type="checkbox"/> OTHER: Express Mail Certification <input type="checkbox"/> Check # <u> </u> (\$ <u> </u>)	

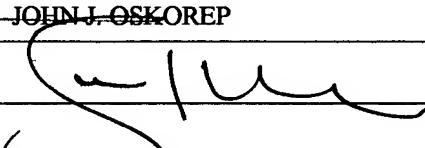
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-In-Part of prior application no.:

Prior application information: Examiner: _____

Group/Art Unit: _____

18. CORRESPONDENCE ADDRESS

Customer Number () Or Bar Code Label			
OR			
<input checked="" type="checkbox"/> Correspondence Address Below			
NAME		ATTN: John J. Oskorep	
ADDRESS		One Magnificent Mile Center 980 N. Michigan Avenue, Suite 1400 Chicago, Illinois 60611	
Telephone: 312-222-1860		Fax No.: 773-477-6144	
Name (print/type)	JOHN J. OSKOREP		Registration No.: (Attorney/Agent) 41,234
Signature			Date 29 July 2003

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07/29/03
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FEE TRANSMITTAL

Attorney Docket No.	HSJ9-2003-0048US1
First Named Inventor:	Hsiao
Application Number	not yet assigned
Filing Date:	not yet assigned
Examiner Name:	not yet assigned
Group/Art Unit:	not yet assigned

TOTAL AMOUNT OF PAYMENT:	\$ 1054.00
METHOD OF PAYMENT (check One)	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 50-2587 Deposit Account Name: Hitachi Global Storage Technologies <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17
	2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other

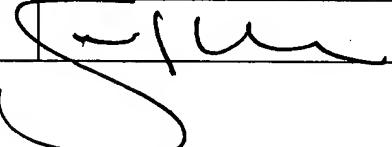
2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$ 750.00	\$375.00	\$ 750.00
Total Claims	30 - 20 =	10	X \$ 18.00	X \$ 9.00	\$ 180.00
Independent Claims	4 - 3 =	1	X \$ 84.00	X \$ 42.00	\$ 84.00
Multiple Dependent Claim(s) (if applicable)	0		\$ 280.00	\$140.00	\$ 0.00
Total of above Calculations =					\$ 1,014.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 330.00	\$ 165.00	\$ 0.00
Reissue filing fee	\$ 740.00	\$ 370.00	\$ 0.00
Provisional filing fee	\$ 160.00	\$ 80.00	\$ 0.00
Total of above Calculations =			\$ 0.00

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
Assignment Recordation	\$ 40.00	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$ 40.00

Name (print/type)	John J. Oskorep	Registration No.: (Attorney/Agent)	41,234
Signature		Date	29 July 2003



"EXPRESS MAIL" MAILING LABEL NO. ER 259338301 US

DATE OF DEPOSIT: 29 July 2003

I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING
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37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED
TO THE ASSISTANT COMMISSIONER FOR PATENTS,
WASHINGTON, D.C. 20231.

John J. Oskorep

NAME



SIGNATURE